

the habit disagreed with them. 4th. That, as a rule, this disease is not met with in special connection with puberty, with celibacy, or with sexual excesses. 5th. That it is not usually associated with any other disease of the nervous system. 6th. That amongst the measures of treatment the prohibition of tobacco seems to rank first in importance. 7th. That the circumstantial evidence tending to connect the disease with the use of tobacco as a cause is of such a nature as to entitle the question to the serious consideration of the Profession. The writer wishes it to be clearly understood that he does not advocate any particular view, and that his wish is simply to draw attention to the clinical facts. He would add further that it is quite clear, supposing that tobacco does sometimes cause the disease, that it does so only in certain constitutions, some peculiar idiosyncrasy being required; and that it is at best only one of the causes by which this form of amaurosis may be produced.—*Med. Times and Gazette*, Sept. 28th, 1867.

48. *Ophthalmic Inflammation after Division of the 5th Nerve*.—Since Snel-len and Büttner's researches we have generally believed that the ophthalmic inflammation which follows division of the 5th nerve is owing to the eye having lost its sensibility, and being therefore no longer able to protect itself against external irritants; for when means were taken to prevent the entrance of foreign bodies into the eye, the inflammation did not result. Meissner (*Henle und Pfeufer's Zeitschrift*, 3te Reihe, xxix. Heft 1, p. 96) has observed that in a rabbit in which he partially divided the ophthalmic branch of the 5th nerve the usual inflammation of the eye resulted, notwithstanding the apparently complete preservation of the sensibility. He is therefore disposed to think that the cut had injured the vasomotor nerves, or more probably the trophic nerves (that is, the nerves which immediately preside over the nutrition of the textures) of the eye. In the succeeding number of the same journal (p. 217), Schiff writes to say, that Meissner's observation entirely supports the explanation of the phenomenon advanced by him in his *Nerven Physiologie*, p. 387, and that he has observed four cases in which, after injury to the 5th nerve inside the skull in animals, the ophthalmic disturbance followed, notwithstanding the preservation of the sensibility of the eye and its appendages.—*Journ. Anat. and Phys.*, Nov. 1867.

49. *Subconjunctival Injection of a Solution of Chloride of Sodium to promote the Absorption of Corneal Opacities*.—Prof. ROTHMUND (*Monats. Bl. f. Augenheilk.*, March and May, 1866) has been employing a subconjunctival injection of a solution of chloride of sodium (a scruple to an ounce of water) to promote the absorption of the diffuse corneal opacities left behind by parenchymatous inflammation. In six cases he believes that he has obtained more speedy results than any other known means would have yielded. The solution is warmed, and is very slowly injected by a syringe with a curved nozzle, through a puncture about a line and a half or two lines from the margin of the cornea. The immediate effect is to surround the cornea with an elevated ring like that of chemosis. Under a compressive bandage, the swelling disappears in five or six hours, and the resulting irritation in five or six days, after which time the cornea begins to clear from the margin. After three or four weeks the injection may be repeated; and after from three to five injections, the formation of an artificial pupil has been practicable.—*R. Lond. Oph. Hosp. Rep.*, Vol. V., No. IV.

MIDWIFERY.

50. *Danger of Administering Narcotics to Pregnant Women*.—In a paper by the late Dr. ADAMS, of Banchory, published in the *Edinburgh Med. Journ.* (Nov. 1867), the administration of opium in full doses to pregnant women is asserted to be highly dangerous to the child. Opium given in cases of threatened abortion almost invariably ends, it is stated, in the expulsion of a dead

foetus, and that it should therefore never be given until all hopes of prolonging gestation are gone.

51. *Intra-Uterine Amputation*.—Dr. BRYCE exhibited at the meeting of the Edinburgh Obstetrical Society (Feb. 27, 1867), a case of this. The subject of it was a girl twelve years of age. There were two cicatrices on the end of the bones of the forearm, with a small projection of rudimentary finger. The amputation had taken place $2\frac{1}{2}$ inches below the elbow, and the end of both ulna and radius were distinctly felt.

Dr. KEILLER said that he had seen five such cases in Dundee and neighbourhood. In one case he saw with the late Dr. Munro, there was amputation of both lower limbs below the knees, the left arm was similar to Dr. Bryce's case, and the fingers of the right hand were webbed. This child was otherwise well-formed, and lived for some time. He (Dr. K.) had also examined a young man who had lost his left upper extremity together with the scapula by intra-uterine amputation, the cicatrix being very large and distinct.

Sir JAMES SIMPSON had seen seven cases in Edinburgh of intra-uterine amputation, all of left arm, with rudimentary fingers existing, and he remarked that it was almost universally the left arm. He calculated, some years ago, that if this deformity was as common elsewhere as in Edinburgh—as was probably the fact—some forty thousand or fifty thousand such single-handed individuals probably existed in the world. The fact of the embryo generally lying on the left side might account for the left-arm amputations. He (Sir J.) related the case of a girl who had neither arms nor legs, residing in the Highlands; also a student, and lately an A. M. of this university, without arms, who wrote his exercises with his feet.

Dr. BURN had met with two cases of intra-uterine amputation of the left arm.—*Edinburgh Med. Journ.*, June, 1867.

52. *Defects of Ordinary Sponge Tents; New Kind of Carbolyzed Sponge Tent*.—Mr. ROBERT ELLIS, in a paper read before the Obstetrical Society of London (July 3d), after adverting to the serious inconveniences and occasional danger incident to the use of the common sponge tents, proceeded to describe a new kind introduced by himself under the name of carbolyzed sponge tent. In this invention sponge is still retained as the dilating agent, but the tent is prepared by a peculiar process which renders it incapable of putrefaction, without diminishing its value as a dilator. This is accomplished by introducing into the core of the tent several threads of cotton-wick steeped in carbolic acid; and after the sponge is rolled into its proper shape, it is then immersed in cocoa butter, to which a certain quantity of glacial carbolic acid is added. The disinfectant properties of this agent completely protect the tents, and they are withdrawn in an inodorous state even after a stay of twelve or eighteen hours in the cervical canal. The shape and size of these sponge tents also differ from the ordinary kind, which are both clumsy and dangerous, as well as disgusting, in their use. These are spindle-shaped, and thus accurately adapt themselves to the fusiform character of the canal which they are intended to dilate. They require no support when *in situ*, but, by virtue of the immediate fusion of the enveloping material, they take to their work immediately, and are firmly kept in position. The author stated that he had a large experience of their utility and value; and that they could be procured ready for use, from Messrs. Bradley. Mr. Ellis also exhibited an Introducer for Sponge Tents. This instrument consists simply of a slender uterine sound tapered to a fine point, which is thrust up into the tent. A short distance from its extremity a small flat metal collar is attached, on which the sponge tent rests, so as to be firmly supported while it is pressed into its place. Mr. Ellis spoke in high terms of the great handiness of this contrivance, which may be obtained of Messrs. Meyer and Meltzer.—*Med. Times and Gaz.*, Sept. 28, 1865.

53. *Pepsine in Vomiting of Pregnancy*.—M. GROSS has used pepsine in doses of eight grains before meals, with complete relief, in a case of obstinate vomiting in pregnancy.